

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Thomas Casson for Congress

ADDRESS (number and street)

PO Box 525

Check if different
than previously
reported. (ACC)

Auburn

AL

36831

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00557918

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

AL

03

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Andrew K Jordan

Signature of Treasurer

Mr. Andrew K Jordan

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 07 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Thomas Casson for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	11425.00	11425.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	11425.00	11425.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6678.16	6678.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	6678.16	6678.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4746.84	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 10

Write or Type Committee Name

Thomas Casson for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

10750.00

10750.00

(ii) Unitemized.....

675.00

675.00

(iii) TOTAL of contributions from individuals ▶

11425.00

11425.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

11425.00

11425.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

11425.00

11425.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 10

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6678.16	6678.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6678.16	6678.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11425.00
25. SUBTOTAL (add Line 23 and Line 24).....	11425.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6678.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4746.84

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 10

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Thomas Casson for Congress

A. Full Name (Last, First, Middle Initial) Mr. Christopher W Bell			Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2014		
Mailing Address 4488 Galen Way			Transaction ID : SA11AI.4124		
City	State	Zip Code			
Birmingham	AL	35242			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00		
Name of Employer NaphCare, Inc		Occupation Vice President			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
B. Full Name (Last, First, Middle Initial) Mr. Edmund R Cannon			Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014		
Mailing Address 1205 Morris Avenue			Transaction ID : SA11AI.4103		
City	State	Zip Code			
Opelika	AL	36801			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 1000.00		
Name of Employer Cannon Land & Timber		Occupation Owner			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			
C. Full Name (Last, First, Middle Initial) Mr. Brent A Catchings			Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014		
Mailing Address 1002 Birch Circle			Transaction ID : SA11AI.4101		
City	State	Zip Code			
Auburn	AL	36830			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00		
Name of Employer Southern Union Community Coll		Occupation Teacher			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00			
SUBTOTAL of Receipts This Page (optional).....			1750.00		
TOTAL This Period (last page this line number only).....					

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 10
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Thomas Casson for Congress

A. Full Name (Last, First, Middle Initial) Mr. Rylen O Crews		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 2145 Felicity Lane		Transaction ID : SA11AI.4120	
City Auburn	State AL	Zip Code 36830	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer CVS	Occupation Pharmacist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		
B. Full Name (Last, First, Middle Initial) Mr. Staley E Fincher		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 1977 Cox Road		Transaction ID : SA11AI.4140	
City Auburn	State AL	Zip Code 36832	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		
C. Full Name (Last, First, Middle Initial) Mr. Nicholas W Hayes		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 1350 Peachtree Circle		Transaction ID : SA11AI.4116	
City Auburn	State AL	Zip Code 36830	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Colvin Hayes & Assoc	Occupation Investigator		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 1750.00	
TOTAL This Period (last page this line number only).....		_____	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 10

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Thomas Casson for Congress

Full Name (Last, First, Middle Initial)

Mr. Howard J Porter Jr.

Mailing Address 575 Lee Road 14

City

Auburn

State

AL

Zip Code

36830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Porter Property

Occupation

Real Estate Sales / Lease

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Mrs. Katherine Q Porter

Mailing Address 575 Lee Road 14

City

Auburn

State

AL

Zip Code

36830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Porter Properties

Occupation

Real Estate Sales / Lease

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Mr. Rodney K Reid

Mailing Address 535 Airport Road

City

Auburn

State

AL

Zip Code

36830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2014

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 10

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Thomas Casson for Congress

Full Name (Last, First, Middle Initial)

Mr. Michael V Shannon

Mailing Address 1447 Turn Lake Drive

City

Auburn

State

AL

Zip Code

36830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shannon Strobel & Weaver

Occupation

Real Estate Developer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		23		2014

Transaction ID : SA11AI.4114

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mr. Jim WaltersMailing Address 4170 Spinnacker Drive
#606

City

Gulf Shores

State

AL

Zip Code

36542

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mr. Travis Wisdom

Mailing Address 1474 Turn Lake Drive

City

Auburn

State

AL

Zip Code

36830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wisdom Tree, LLC

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Transaction ID : SA11AI.4110

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

2000.00

TOTAL This Period (last page this line number only).....

10750.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 10

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Thomas Casson for Congress

Full Name (Last, First, Middle Initial)

A. Kemp & Sons Printing

Mailing Address 2301 Enterprise Drive
Suite A

City State Zip Code
Opelika AL 36801

Purpose of Disbursement
Business Cards

006

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 27 / 2014

Amount of Each Disbursement this Period

221.65

Transaction ID : SB17.4149

Full Name (Last, First, Middle Initial)

B. Kemp & Sons Printing

Mailing Address 2301 Enterprise Drive
Suite A

City State Zip Code
Opelika AL 36801

Purpose of Disbursement
Thank You Cards

006

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 12 / 2014

Amount of Each Disbursement this Period

220.54

Transaction ID : SB17.4151

Full Name (Last, First, Middle Initial)

C. Revolution Images

Mailing Address PO Box 1971

City State Zip Code
Opelika AL 36803

Purpose of Disbursement
Web Design / Development / Social Media

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 20 / 2014

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4142

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3442.19

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 10

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Thomas Casson for Congress

Full Name (Last, First, Middle Initial)

A. Revolution Images

Mailing Address PO Box 1971

City	State	Zip Code
Opelika	AL	36803

Purpose of Disbursement
Web Design / Development / Social Media

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4144

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

6442.19